### Case 16-29082 Doc 1 Filed 09/12/16 Entered 09/12/16 15:28:02 Desc Main Document Page 1 of 46

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is or your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	First name  E  Middle name  Stein	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you ha used in the last 8 years Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4280		

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Case number (if known)

Debtor 1 Elizabeth E Stein

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
<ol> <li>Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years</li> </ol>		☐ I have not used any business name or EINs.		
Include trade names and doing business as names	Business name(s)	Business name(s)		
	EINs	EINs		
i. Where you live		If Debtor 2 lives at a different address:		
	6027 S. Peck Ave La Grange Highlands, IL 60525  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
	Cook	Number, Street, City, State & ZIF Code		
	County	County		
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
	2102 W. Race Chicago, IL 60612			
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
i. Why you are choosing this district to file for	Check one:	Check one:		
bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Case number (if known) Debtor 1 Elizabeth E Stein

⊃ar	t 2: Tell the Court About	Your Ba	nkruptcy Ca	ıse			
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	■ Ch	apter 7				
		☐ Ch	apter 11				
		☐ Ch	apter 12				
		☐ Ch	apter 13				
3.	How you will pay the fee		about how yo	ou may pay. Typ attorney is subi	pically, if you are paying the fee y	ck with the clerk's office in your local court for more courself, you may pay with cash, cashier's check, or rhalf, your attorney may pay with a credit card or check	noney
					tallments. If you choose this optots (Official Form 103A).	ion, sign and attach the Application for Individuals to	Pay
			I request that but is not req	it my fee be wa uired to, waive y	aived (You may request this option	on only if you are filing for Chapter 7. By law, a judge our income is less than 150% of the official poverty li in installments). If you choose this option, you must f	ne that
						icial Form 103B) and file it with your petition.	iii out
).	Have you filed for bankruptcy within the	■ No.					
	last 8 years?	☐ Yes					
			District		When	Case number	
			District		When When	Case number	
			District		when	Case number	
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	S.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ No.	Go to I	ine 12.			
	residence :	☐ Yes	s. Has yo	our landlord obta	ained an eviction judgment agair	st you and do you want to stay in your residence?	
				No. Go to line	12.		
				Yes. Fill out <i>In</i> bankruptcy per		Judgment Against You (Form 101A) and file it with t	his

Document Page 4 of 46 Case number (if known) Debtor 1 Elizabeth E Stein Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any

Number, Street, City, State & Zip Code

Voluntary Petition for Individuals Filing for Bankruptcy

If immediate attention is

Where is the property?

needed, why is it needed?

property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

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Debtor 1 Elizabeth E Stein

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Page 6 of 46 Case number (if known) Debtor 1 Elizabeth E Stein Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Elizabeth E Stein Signature of Debtor 2 Elizabeth E Stein Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on September 12, 2016

MM / DD / YYYY

Debtor 1 Elizabeth E Stein Page 7 of 46 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	e M. Greenberg Attorney for Debtor	Date	September 12, 2016 MM / DD / YYYY
Lorraine M	I. Greenberg		
Lorraine M	I. Greenberg		
Suite 800	higan Avenue		
Chicago, I Number, Street,	City, State & ZIP Code		
Contact phone	312-588-3330	Email address	Igreenberg@greenberglaw.net
3129023 Bar number & St	rate		

		Docume	ent Page 8 of 46	
Fill in this infor	mation to identify your	case:		
Debtor 1	Elizabeth E Stein			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
if known)				☐ Check if this is an amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	2,170.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	2,170.00
Par	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	14,303.32
	Your total liabilities	\$	14,303.32
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	800.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	881.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	nedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.

48.33

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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Fill in this i	informatio	n to identify your	case and this filin	g:			
Debtor 1	E	lizabeth E Stein					
<b>5</b> 5	Fi	rst Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing	ng) Fir	rst Name	Middle Name	Last Name			
United State	tes Bankrup	otcy Court for the:	NORTHERN DIST	TRICT OF ILLINOIS			
Casa numb	·					_	
Case numb							Check if this is an amended filing
Official	Form	106A/B					
_		VB: Prop	ertv				12/15
n each categ hink it fits be nformation. I Answer every	gory, separa est. Be as o If more spac y question.	tely list and describe complete and accura ce is needed, attach	e items. List an asse te as possible. If two a separate sheet to	t only once. If an asset fits in mo o married people are filing togeth this form. On the top of any addit	er, both are equally responsib tional pages, write your name	ole for supply	ring correct
Part 1: Des	scribe Each	Residence, Building	, Land, or Other Rea	I Estate You Own or Have an Inte	erest In		
. Do you ow	wn or have a	ny legal or equitable	interest in any resi	dence, building, land, or similar p	property?		
■ No. Go	to Part 2.						
☐ Yes. W	Vhere is the p	property?					
Part 2: Des	scribe Your	Vehicles					
someone els	se drives. If		e, also report it on	any vehicles, whether they ar Schedule G: Executory Contrac orcycles		,	,
3.1 Make	e Yam	aha	Who has	an interest in the property? Check	Do not deduct s	ecured claims	or exemptions. Put
Mode	Vina		■ Debtor		the amount of a		aims on <i>Schedule D:</i> Secured by Property.
Year:	2007	•	☐ Debtor		Current value of	of the C	urrent value of the
	oximate mile or information			1 and Debtor 2 only	entire property	? po	ortion you own?
scoo		<u> </u>	☐ Check	t one of the debtors and another  if this is community property structions)	\$90	00.00	\$900.00
			ΓVs and other rec	reational vehicles, other vehi			
■ No							
☐ Yes							
.pages y	ou have at	ttached for Part 2.	Write that numbe	your entries from Part 2, incli r here			\$900.00
		Personal and House		y of the following items?		Cur	rent value of the
·			ible interest in an	y of the following items?		<b>port</b> Do n	ion you own? not deduct secured ns or exemptions.
. Househo	old goods	and furnishings					

Examples: Major appliances, furniture, linens, china, kitchenware

■ No

Official Form 106A/B Schedule A/B: Property

De	ebtor 1	Case 16-29082  Elizabeth E Stein	Doc 1	Filed 09/12/16 Document	Entered 09/12/16 15:28: Page 11 of 46 Case number (if k	
	_	Describe				
7.	Electror	nics			oment; computers, printers, scanners; m	nusic collections; electronic devices
	□ No ■ Yes.	Describe	,	7 7 7 0		
		cell p	hone, laptop			\$500.00
9.	■ No □ Yes.  Equipme Example ■ No □ Yes.  Firearm Examp ■ No □ Yes.  Clother Examp	other collections, mer  Describe  ent for sports and hobb es: Sports, photographic, musical instruments  Describe  ns  bles: Pistols, rifles, shotgu  Describe	ies exercise, and o	other hobby equipment; n, and related equipmen		
	□ No ■ Yes.	Describe				
		neces	sary wearing	g apparel, bible, tex	books, family pictures	\$350.00
13.	■ No □ Yes.  Non-fa Examp ■ No □ Yes.  Any otl ■ No	Describe  rm animals bles: Dogs, cats, birds, ho	rses hold items yo		ding rings, heirloom jewelry, watches, g	
	i. Add t	·	your entries fr		ny entries for pages you have attache	\$850.00
		scribe Your Financial Asse				
Do	o you ow	vn or have any legal or e	equitable inter	est in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No <sup>′</sup>	oles: Money you have in y		•	osit box, and on hand when you file you	r petition

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Case number (if known)

Document Debtor 1 Elizabeth E Stein

					Cash	\$380.00
17.	institutions. I			ounts; certificates of deposit; s with the same institution, lis	; shares in credit unions, brokerage l st each.	houses, and other similar
	□ No ■ Yes			Institution name:		
		17.1.	Checking	PNC Bank		\$20.00
		17.2.	Checking	ANZ Bank, Sydne	ey, Australia	\$20.00
18	Bonds, mutual funds, o  Examples: Bond funds,  No  Yes			okerage firms, money marke	et accounts	
19.		ock and			d businesses, including an interes	st in an LLC, partnership, and
	☐ Yes. Give specific info		about them me of entity:		% of ownership:	
20.	Negotiable instruments i	nclude	personal checks, cas	otiable and non-negotiable shiers' checks, promissory no ansfer to someone by signing	otes, and money orders.	
	☐ Yes. Give specific info		about them uer name:			
21.	Retirement or pension Examples: Interests in If			403(b), thrift savings account	ts, or other pension or profit-sharing	plans
	☐ Yes. List each account		tely. of account:	Institution name:		
22.		l deposi	ts you have made so	o that you may continue serv public utilities (electric, gas,	vice or use from a company water), telecommunications compar	nies, or others
	■ No □ Yes			Institution name or in	ndividual:	
23.	. Annuities (A contract for	a perio	dic payment of mone	ey to you, either for life or for	a number of years)	
	***	uer nam	ne and description.			
24	. Interests in an education 26 U.S.C. §§ 530(b)(1), 5 ■ No			ualified ABLE program, or	runder a qualified state tuition pro	ogram.
		titution	name and description	n. Separately file the records	s of any interests.11 U.S.C. § 521(c)	:
25.	Trusts, equitable or fut	ure inte	rests in property (o	other than anything listed in	n line 1), and rights or powers exe	ercisable for your benefit
	☐ Yes. Give specific info	rmation	about them			
26.	Examples: Internet dom:			nd other intellectual proper eds from royalties and licensi		
	<ul><li>■ No</li><li>☐ Yes. Give specific info</li></ul>	rmation	about them			

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De	ebtor 1	Elizabeth E Stein		Doddinent	Case number (if known)	
	Exam <sub>i</sub> ■ No	ses, franchises, and other ples: Building permits, excluding Give specific information a	usive licenses		n holdings, liquor licenses, professional licens	es
		property owed to you?				Current value of the
IVI	oney or	property owed to you:				portion you own?  Do not deduct secured claims or exemptions.
	■ No	funds owed to you  Give specific information a	bout them, inc	cluding whether you alre	ady filed the returns and the tax years	
	Exam <sub>i</sub> ■ No	y support ples: Past due or lump sum Give specific information		usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
	Exam <sub>i</sub> ■ No	amounts someone owes ples: Unpaid wages, disabil benefits; unpaid loans Give specific information	lity insurance page you made to		efits, sick pay, vacation pay, workers' comper	nsation, Social Security
	Exam <sub>i</sub> ■ No	Name the insurance comp			HSA); credit, homeowner's, or renter's insurar  Beneficiary:	nce Surrender or refund
		00	ipany namo.		zenenaciy.	value:
32.	If you somed	aterest in property that is a are the beneficiary of a living one has died.  Give specific information.			ed surance policy, or are currently entitled to rece	eive property because
	Exam <sub>i</sub> ■ No	s against third parties, wheles: Accidents, employme  Describe each claim	nt disputes, in		it or made a demand for payment to sue	
34.	■ No	contingent and unliquida  Describe each claim		every nature, includin	g counterclaims of the debtor and rights to	set off claims
	■ No	nancial assets you did no	•			
36					ny entries for pages you have attached	\$420.00
Pa	rt 5: De	escribe Any Business-Related	d Property You	Own or Have an Interest	In. List any real estate in Part 1.	
37.	Do you	own or have any legal or equ	itable interest	in any business-related p	roperty?	
	_	o to Part 6.				
I	→ Yes. (	Go to line 38.				

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Case number (if known) Document Debtor 1 Elizabeth E Stein Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ..... \$0.00 Part 2: Total vehicles, line 5 \$900.00 57. Part 3: Total personal and household items, line 15 \$850.00

\$420.00

\$0.00

\$0.00

\$0.00

Copy personal property total

\$2,170.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

Part 6: Total farm- and fishing-related property, line 52

Part 4: Total financial assets, line 36

Part 5: Total business-related property, line 45

Part 7: Total other property not listed, line 54

62. Total personal property. Add lines 56 through 61...

Doc 1

\$2,170.00

\$2,170.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Elizabeth E Stein			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the I	Property	You	Claim a	s Exemp	ıt
---------	----------	-------	----------	-----	---------	---------	----

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	unt of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Chec	k only one box for each exemption.	
2007 Yamaha Vino 125 3200 miles scooter	\$900.00			735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
cell phone, laptop Line from Schedule A/B: 7.1	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Elle Holli Schedule AVB. 1.1			100% of fair market value, up to any applicable statutory limit	
necessary wearing apparel, bible, texbooks, family pictures	\$350.00		\$350.00	735 ILCS 5/12-1001(a)
Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$380.00	•	\$380.00	735 ILCS 5/12-1001(b)
Enternolli dollodale 702.			100% of fair market value, up to any applicable statutory limit	
Checking: PNC Bank Line from Schedule A/B: 17.1	\$20.00		\$20.00	735 ILCS 5/12-1001(b)
Line IIom Schedule AVB: 11.1			100% of fair market value, up to any applicable statutory limit	

Case 16-29082 Doc 1 Filed 09/12/16 Entered 09/12/16 15:28:02 Desc Main Document Page 16 of 46 Debtor 1 Elizabeth E Stein Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Checking: ANZ Bank, Sydney, 735 ILCS 5/12-1001(b) \$20.00 \$20.00 Australia 100% of fair market value, up to Line from Schedule A/B: 17.2 any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

Fill in this inforn					
Debtor 1	Elizabeth E Stein				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name	_	
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number _					
(if known)					Check if this is an
					amended filing

### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

	Ous	C 10 20002 E	Docum	nent Page 1	18 of 46		o man
Fill in	this informa	ation to identify your	ase:				
Debtor	r 1	Elizabeth E Stein					
Debioi		First Name	Middle Name	Last Name			
Debtor							
(Spouse	if, filing)	First Name	Middle Name	Last Name			
United	States Bank	cruptcy Court for the:	NORTHERN DISTRI	CT OF ILLINOIS			
Case r	number						
(if known							heck if this is an
						a	mended filing
Sche		F: Creditors W					12/15
any exe Schedul Schedul left. Atta	cutory contra le G: Executo le D: Creditor ach the Contil	cts or unexpired leases ry Contracts and Unexp	that could result in a cla red Leases (Official Forr ıred by Property. If more	im. Also list executory n 106G). Do not include space is needed, copy	contracts on Schedule e any creditors with pa the Part you need, fil	le A/B: Property (Offici artially secured claims I it out, number the en	that are listed in tries in the boxes on the
Part 1:	List All	of Your PRIORITY Un	secured Claims				
1. Do	any creditors	s have priority unsecured	d claims against you?				
	No. Go to Par	t 2.					
	Yes.						
Part 2:	List All	of Your NONPRIORIT	Y Unsecured Claims				
3. Do	any creditors	s have nonpriority unsec	ured claims against you	?			
	No. You have	nothing to report in this pa	art. Submit this form to the	court with your other scl	hedules.		
_	Yes.						
		appriority upgooured al	sime in the alphabetical	order of the eraditor wh	a halda asah alaim If	a araditar baa mara tha	n ana nannyiarity
uns tha	secured claim,	list the creditor separately holds a particular claim, li	for each claim. For each	claim listed, identify what	t type of claim it is. Do n	ot list claims already inc	luded in Part 1. If more
							Total claim
4.1	Chase Ca	ard	Last 4 dig	gits of account number	0030		\$4,334.00
	Nonpriority C	Creditor's Name					. , ,
	Po Box 1	5298	When we	a tha daht inayunad?	Opened 10/11	Last Active	
	Wilmingt	on, DE 19850	when wa	s the debt incurred?	5/04/16		-
		eet City State Zlp Code	As of the	date you file, the claim	is: Check all that apply	/	
	Who incurre	ed the debt? Check one.					
	Debtor 1	only	☐ Contin	gent			
	Debtor 2	only	☐ Unliqu	idated			
	Debtor 1	and Debtor 2 only	☐ Disput	ed			
	☐ At least of	one of the debtors and and		IONPRIORITY unsecure	ed claim:		
		this claim is for a comm					
	debt	subject to offset?		itions arising out of a sep priority claims	paration agreement or d	ivorce that you did not	
	No	audject to onset?		priority claims to pension or profit-shar	ing plans, and other sim	nilar dehts	
						iliai uebis	
	☐ Yes		Other.	Specify Credit Car	a		

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Case number (if know) Debtor 1 Elizabeth E Stein 4.2 \$4,134.00 **Discover Financial** Last 4 digits of account number 5724 Nonpriority Creditor's Name Opened 02/13 Last Active Po Box 3025 When was the debt incurred? 8/12/16 New Albany, OH 43054 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.3 **First Premier Bank** 8350 Last 4 digits of account number \$738.00 Nonpriority Creditor's Name Opened 11/09 Last Active 601 S Minneaplois Ave When was the debt incurred? 8/03/16 Dious FDalls, SD 57104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.4 **PNC Bank** Last 4 digits of account number 4901 \$3.002.32 Nonpriority Creditor's Name PO Box 3429 When was the debt incurred? Pittsburgh, PA 15230-3429 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

	Case	10-29002 DUC 1		20 of 4		Civialii
Debtor 1	Elizabeth	E Stein	——————————————————————————————————————	Case	number (if know)	
4.5	Synchrony	Bank/PayPal Cr	Last 4 digits of account number	er <b>243</b> 2	2	\$2,095.00
	Nonpriority Cred			_		• •
	Po Box 965	064	When was the debt incurred?		ned 08/11 Last Active	
	Orlando, FL	. 32896	when was the dept incurred?	8/19	/16	
		City State ZIp Code	As of the date you file, the clai	im is: Chec	ck all that apply	
	_	he debt? Check one.	_			
	Debtor 1 onl	•	Contingent			
	Debtor 2 onl	•	Unliquidated			
	Debtor 1 and	•	☐ Disputed			
	At least one	of the debtors and another	Type of NONPRIORITY unsecu	ıred claim:	:	
		s claim is for a community	☐ Student loans			
	debt Is the claim su	bject to offset?	☐ Obligations arising out of a sereport as priority claims	eparation a	greement or divorce that you did not	
	■ No		Debts to pension or profit-sha	aring plans,	, and other similar debts	
	☐ Yes		Other. Specify Charge A	Account		
Part 3:	List Others	to Re Notified About a D	ebt That You Already Listed			
			about your bankruptcy, for a debt the	at vou alro	adv listed in Parts 1 or 2. For examp	lo if a collection agency
is tryin have m	g to collect fro ore than one c	m you for a debt you owe to s	someone else, list the original credito nat you listed in Parts 1 or 2, list the a	r in Parts 1	or 2, then list the collection agency	here. Similarly, if you
Name an	d Address		On which entry in Part 1 or Part 2 did y	you list the	original creditor?	
Discover Financial			Line 4.2 of (Check one):			ms
	(15316	1050	■ Part 2: Creditors with Nonpriority Unsecured Claims			Claims
VVIIIIIII	gton, DE 19	1030	Last 4 digits of account number			
Name -	-l A -l -l		On which are training Don't A are Don't O did.	!!=4 41	animinal anadikan	
	d Address remier Banl	<b>(</b>	On which entry in Part 1 or Part 2 did y Line <b>4.3</b> of ( <i>Check one</i> ):		original creditor? : Creditors with Priority Unsecured Clai	me
	Louise Ave		<u></u> e. (e.,e.,e.,e.,e.,e.,e.,e.,e.	_	: Creditors with Nonpriority Unsecured	
Sioux I	Falls, SD 57	104		— T ant 2.	. Creditors with Nonphority Onsecured	Ciairis
			Last 4 digits of account number			
	d Address		On which entry in Part 1 or Part 2 did y	you list the	original creditor?	
•	rony Bank	Dant	Line 4.5 of (Check one):	Part 1:	Creditors with Priority Unsecured Clair	ms
	sankruptcy I c 965061	Dept		Part 2:	Creditors with Nonpriority Unsecured	Claims
	o, FL 32896	-5061				
	,		Last 4 digits of account number			
Name an	d Address		On which entry in Part 1 or Part 2 did y	vou list the	original creditor?	
	ony Bank/F	PayPal Cr	Line 4.5 of (Check one):		Creditors with Priority Unsecured Clai	ms
	965005			Part 2:	Creditors with Nonpriority Unsecured	Claims
Orland	o, FL 32896	i	Last 4 digits of account number			
Part 4:	Add the Ar	mounts for Each Type of <b>l</b>	Jnsecured Claim			
	he amounts of unsecured cla		aims. This information is for statistica	al reporting	g purposes only. 28 U.S.C. §159. Add	d the amounts for each
					Total Claim	
_	6a.	Domestic support obligation	ns	6a.	\$0.00	
	otal ims					
from Pa			ots you owe the government	6b.	\$0.00	-
	6c.	· · · · · · · · · · · · · · · · · · ·	al injury while you were intoxicated	6c.	\$ 0.00	-
	6d.	Other. Add all other priority u	nsecured claims. Write that amount here	e. 6d.	\$	-

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total				

Official Form 106 E/F

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claims rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 14,303.32
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 14,303.32

Official Form 106 E/F

		17(1,111)	111 171111.77 171 -	+()
Fill in this infor	rmation to identify your	case:		
Debtor 1	Elizabeth E Stein			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the c	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>-</del>

		Docume	ent Page 23 o	of 46	
Fill in this	information to identify you	r case:			
Debtor 1	Elizabeth E Stair	•			
Deptor 1	Elizabeth E Steil	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Sta	ites Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
	,,				
Case num	ber				
(if known)					Check if this is an
					amended filing
Officia	l Form 106H				
		Johtoro			
Sched	lule H: Your Cod	reptors			12/15
Arizon  No. Yes  3. In Col	hin the last 8 years, have yong, California, Idaho, Louisiana, Go to line 3.  S. Did your spouse, former spouse	a, Nevada, New Mexico, Pu ouse, or legal equivalent live	erto Rico, Texas, Wash with you at the time? spouse as a codebto	nington, and Wisconsin.)	ng with you. List the person shown
Form					he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt
	· · · · · · · · · · · · · · · · · · ·			Officer all serieuch	es that apply.
3.1				D Schedule D, lin	ne
	Name			☐ Schedule E/F,	line
				☐ Schedule G, lir	ne
=	Number Street			<u> </u>	
	City	State	ZIP Code		
3.2				☐ Schedule D, lin	ne
	Name			□ Schedule E/F,	
				☐ Schedule G, lir	
-	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information to identify you	r case:								
	otor 1 Elizabeth									
_	otor 2				_					
Uni	ted States Bankruptcy Court for t	the: NORTHERN DISTRI	CT OF ILLINOIS							
	se number 		-			□ An		ed filing ent showin	g postpetition	
0	fficial Form 106l					M	M / DD/ Y	YYY		
S	chedule I: Your In	come								12/15
spo atta	plying correct information. If you see. If you are separated and you have separated to this form the separate sheet	our spouse is not filing w n. On the top of any addit	rith you, do not includ ional pages, write you	e inforr	natio	on about y I case nur	your spo mber (if	ouse. If mo known). A	ore space is Answer every	needed, , question
	information.		Debtor 1				_		iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>				☐ Emple	•		
	employers.	Occupation	Yoga Teacher							
	Include part-time, seasonal, or self-employed work.	Employer's name	self employed							
	Occupation may include studer or homemaker, if it applies.	nt Employer's address								
		How long employed t	there? 10 years	i			_			
Par	t 2: Give Details About N	Ionthly Income								
	mate monthly income as of the use unless you are separated.	e date you file this form. If	you have nothing to re	oort for	any I	ine, write	\$0 in the	space. Inc	clude your no	n-filing
	u or your non-filing spouse have e space, attach a separate sheet		ombine the information	for all e	emplo	oyers for th	hat perso	n on the li	nes below. If	you need
						For Debt	tor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sa deductions). If not paid monthly			2.	\$		0.00	\$	N/A	-
3.	Estimate and list monthly over	ertime pay.		3.	+\$		0.00	+\$	N/A	-
4.	Calculate gross Income. Add	l line 2 + line 3		4.	\$		0 00	\$	N/A	

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Deb	tor 1	Elizabeth E Stein	-	Ca	se number (if know	n)				
					or Debtor 1		non-f	Debtor filing s	2 or pouse	
	Cop	by line 4 here	4.	\$	0.0	0	\$		N/A	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	. \$	0.0	0	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.				\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.	. \$		_	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d.	. \$	0.0	0	\$		N/A	
	5e.	Insurance	5e.			0	\$		N/A	
	5f.	Domestic support obligations	5f.				\$		N/A	
	5g.	Union dues	5g.				\$		N/A	
	5h.	Other deductions. Specify:	5h.	.+ \$		_	+ \$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.0	0	\$		N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.0	0_	\$		N/A	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	. \$	800.0	0	\$		N/A	
	8b.	Interest and dividends	8b.	. \$			\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	. \$	0.0	0	\$		N/A	
	8d.	Unemployment compensation	8d.	. \$	0.0	0	\$		N/A	
	8e.	Social Security	8e.	. \$	0.0	0	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.				\$		N/A	
	8g. 8h.	Pension or retirement income Other monthly income. Specify:	8g. 8h.		- 0.0		* + \$		N/A N/A	
	OII.	Other monthly income. Specify.	011.	.+ p	0.0	<u>U</u>	+ • —		N/A	-
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	800.0	0	\$		N/A	
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	800.00 +	\$		N/A	= \$	800.00
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		<b>–</b>		Ť –		14//	-	300.00
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not accify:	depe					chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certain lies						12.	\$	800.00
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?						Combin monthly	ed income
		Voc Evoloin:								

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Fill	in this information to identify your case:		1		
Deb	otor 1 Elizabeth E Stein		Che	ck if this is:	
			□	An amended filing	
	ouse, if filing)			13 expenses as of	ving postpetition chapter the following date:
Unite	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILL	INOIS		MM / DD / YYYY	
Case	se number				
	nown)				
Of	fficial Form 106J		-		
	chedule J: Your Expenses				12/1
Be a	as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to th mber (if known). Answer every question.				
Pari	t 1: Describe Your Household Is this a joint case?				
••	No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expens</i>	ses for Separate House	ehold of Deb	tor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2.  Fill out this information for each dependent			Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				☐ Yes
					□ No □ Yes
		-		_	□ No
					☐ Yes
					□ No
•	Be community brokeds				☐ Yes
3.	Do your expenses include expenses of people other than				
	yourself and your dependents?				
	t 2: Estimate Your Ongoing Monthly Expenses				
exp	timate your expenses as of your bankruptcy filing date unless penses as of a date after the bankruptcy is filed. If this is a su plicable date.				
the	lude expenses paid for with non-cash government assistance value of such assistance and have included it on <i>Schedule I</i> ficial Form 106I.)			Your exp	enses
	,				
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	. Include first mortgag	e 4. §	<b>.</b>	0.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	S	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	Home maintenance, repair, and upkeep expenses     Homeowner's association or condominium dues		4c. § 4d. §		0.00
5.	Additional mortgage payments for your residence, such as	home equity loans	5. S		0.00

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Deb	otor 1	Elizabetl	h E Stein	Case num	nber (if known)	
6.	Utiliti	ies:				
٥.	6a.		, heat, natural gas	6a.	. \$	0.00
	6b.		wer, garbage collection	6b.		0.00
	6c.		e, cell phone, Internet, satellite, and cable services	6c.	. \$	50.00
	6d.	Other. Spe		6d.	· <u> </u>	0.00
7.			ekeeping supplies	7.		500.00
8.			children's education costs	8.		0.00
9.			ry, and dry cleaning	9.	·	86.00
		O,	products and services	10.	· -	45.00
		-	ntal expenses	11.	·	15.00
			Include gas, maintenance, bus or train fare.		•	
			ar payments.	12.	. \$	100.00
13.	Enter	rtainment,	clubs, recreation, newspapers, magazines, and books	13.	. \$	50.00
14.	Chari	itable cont	ributions and religious donations	14.	. \$	0.00
15.	Insur	rance.	-			
			nsurance deducted from your pay or included in lines 4 or 20			
	15a.	Life insura	ance	15a.	•	0.00
	15b.	Health ins	urance	15b.	. \$	35.00
	15c.	Vehicle in:	surance	15c.	. \$	0.00
	15d.	Other insu	ırance. Specify:	15d.	. \$	0.00
16.			clude taxes deducted from your pay or included in lines 4 o	20.		
	Speci	,		16.	. \$	0.00
17.			ease payments:			
			ents for Vehicle 1	17a.	·	0.00
			ents for Vehicle 2	17b.		0.00
		Other. Spe		17c.	. \$	0.00
		Other. Spe		17d.	. \$	0.00
18.			of alimony, maintenance, and support that you did not		¢	0.00
40			your pay on line 5, Schedule I, Your Income (Official For	rm 106l). 18.		
19.			s you make to support others who do not live with you.	40	\$	0.00
20	Speci	· —	erty expenses not included in lines 4 or 5 of this form of	19.		
20.			s on other property	20a.		0.00
		Real estat		20b.		0.00
			homeowner's, or renter's insurance	20b. 20c.	·	0.00
			nce, repair, and upkeep expenses	20d.		0.00
			er's association or condominium dues	20d. 20e.		0.00
24			ers association or condominatin dues		· ·	
۷۱.	Otnei	r: Specify:			. +\$	0.00
22.	Calcu	ulate your	monthly expenses			
	22a. /	Add lines 4	through 21.		\$	881.00
	22b. (	Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Form	ı 106J-2	\$	
			a and 22b. The result is your monthly expenses.		\$	881.00
	,	7 taa 11110 22	a and 225. The result to year menting expenses.			001.00
23.		-	monthly net income.			
		. ,	12 (your combined monthly income) from Schedule I.	23a.		800.00
	23b.	Copy your	monthly expenses from line 22c above.	23b.	\$	881.00
	23c.		our monthly expenses from your monthly income.	220	· ·	-81.00
		The result	is your monthly net income.	23c.	. \$	-01.00
24	Do ve	OII OVDOCÉ	an increase or decrease in your expenses within the yea	ar after you file this	s form?	
<b>∠4</b> .			ou expect to finish paying for your car loan within the year or do you			ase or decrease because of a
			terms of your mortgage?	, , , , , , , , , , , , , , , , , , , ,	,,	
	■ No	0.				
	Пуе		Explain here:			

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Fill in this inform					
Fill In this infor	mation to identify your	Case:			
Debtor 1	Elizabeth E Stein	Middle Name	Last Name		
Debtor 2	i iist ivailie	Wildle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official Forr <b>Declarat</b>		ın Individual	Debtor's Scl	hedules	12/15
If two married pe	eople are filing togethe	r, both are equally respo	nsible for supplying corre	ect information.	
obtaining money		n connection with a bank			ent, concealing property, or or imprisonment for up to 20
Sig	n Below				
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes. N	Name of person				uptcy Petition Preparer's Notice, and Signature (Official Form 119)
	lty of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed	l with this declaration	and
X /s/ Eliz	abeth E Stein		X		
	eth E Stein		Signature of D	Debtor 2	

Date

Signature of Debtor 1

Date September 12, 2016

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Fill	l in this inforn	nation to identify you	r case:					
Del	btor 1	Elizabeth E Stei	Middle Name		Last Name			
Del	btor 2	i iist waine	Wildele Name		Last Name			
(Spo	ouse if, filing)	First Name	Middle Name		Last Name			
Uni	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF IL	LINOIS			
Ca	se number							
(if kr	nown)						_	neck if this is an
							an	nended filing
<u></u>	::::::	407						
	ficial Fo		A ( ( ) ( )					
			Affairs for Indivi					4/1
			ible. If two married people , attach a separate sheet to					
		n). Answer every que			топпи от то тор от шт.,	audinonai pugos, in	,	
Pai	rt 1: Give D	etails About Your Ma	arital Status and Where Yo	u Live	ed Before			
1.	What is your	· current marital stati	us?					
	_							
	<ul><li>☐ Married</li><li>■ Not mar</li></ul>	ried						
_								
2.	During the la	ast 3 years, have you	lived anywhere other than	n whe	re you live now?			
	□ No							
	Yes. Lis	t all of the places you	lived in the last 3 years. Do	not inc	clude where you live now			
	Debtor 1 Pr	ior Address:	Dates Debtor flived there	1	Debtor 2 Prior Ad	dress:		Dates Debtor 2 lived there
	509 S. Trei Pittsburgh	nton ı, PA 15221	From-To: <b>9/12-11/15</b>		☐ Same as Debtor 1			☐ Same as Debtor 1 From-To:
	6027 S. Pe La Grange	<del></del>	From-To:		☐ Same as Debtor 1			☐ Same as Debtor 1 From-To:
	■ No □ Yes. Ma	es include Arizona, Ca	ver live with a spouse or lealifornia, Idaho, Louisiana, Nonedelle H: Your Codebtors (Control of the control of	evada	a, New Mexico, Puerto Ri			
гal	rt 2 Explai	n the Sources of You	ii iiicoiiie					
4.	Fill in the tota	I amount of income yo	mployment or from operation received from all jobs and have income that you recei	l all bu	usinesses, including part-	time activities.	ıs calen	dar years?
	□ No							
	Yes. Fill	in the details.						
			Debtor 1			Debtor 2		
			Sources of income Check all that apply.	(b	Fross income perfore deductions and sxclusions)	Sources of income Check all that apply.		Gross income (before deductions and exclusions)

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				Dahtan 4		Dahtan 0	
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		1 of curre iled for ba	nt year until nkruptcy:	☐ Wages, commissions, bonuses, tips	\$1,100.00	☐ Wages, commissions, bonuses, tips	
				Operating a business		☐ Operating a business	
	last calen nuary 1 to		31, 2015 )	☐ Wages, commissions, bonuses, tips	\$8,170.00	☐ Wages, commissions, bonuses, tips	
				Operating a business		☐ Operating a business	
		dar year be December	efore that: 31, 2014)	☐ Wages, commissions, bonuses, tips	\$25,020.00	☐ Wages, commissions, bonuses, tips	
				Operating a business		☐ Operating a business	
				☐ Wages, commissions, bonuses, tips	\$720.00	☐ Wages, commissions, bonuses, tips	
				Operating a business		☐ Operating a business	
	■ No □ Yes.	Fill in the d	etails.				
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
Pari	: 3: List	Certain Pa	ayments You	Made Before You Filed for	Bankruptcy		
_			•	's debts primarily consume			
<b>0.</b>	□ No.	Neither D	ebtor 1 nor D	' '	umer debts. Consumer debt	s are defined in 11 U.S.C. § 10	01(8) as "incurred by an
		During the	90 days befo	re you filed for bankruptcy, d	id you pay any creditor a tota	I of \$6,425* or more?	
		□ No.	Go to line 7	•			
		□ Yes	paid that cr		nts for domestic support oblig	n one or more payments and pations, such as child support	
		* Subject				or after the date of adjustmen	t.
	Yes.			r both have primarily consure you filed for bankruptcy, d	umer debts. id you pay any creditor a tota	I of \$600 or more?	
		■ No.	Go to line 7				
		□ Yes	List below e	each creditor to whom you pa		d the total amount you paid the cort and alimony. Also, do not	

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Case number (if known) Document Debtor 1 Elizabeth E Stein **Creditor's Name and Address** Dates of payment **Total amount** Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider. Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No

Yes. Fill in the details.

Case title Nature of the case Court or agency Status of the case Case number

Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

No. Go to line 11.

Yes. Fill in the information below.

**Creditor Name and Address** Date Value of the Describe the Property property Explain what happened

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

Nο

Yes. Fill in the details.

**Creditor Name and Address** Describe the action the creditor took Date action was Amount taken

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

П Yes

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Case number (if known) Document Debtor 1 Elizabeth E Stein

Par	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift.	ptcy, did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift and Address:	Describe the gifts	Dates you gave the gifts	Value
14.		ptcy, did you give any gifts or contributions with a total	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankrup or gambling?  No Yes. Fill in the details.	tcy or since you filed for bankruptcy, did you lose any	thing because of the	it, fire, other disaster,
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss nclude the amount that insurance has paid. List pending nsurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or pr	tcy, did you or anyone else acting on your behalf pay reparing a bankruptcy petition? eparers, or credit counseling agencies for services require		rty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Lorraine M. Greenberg 150 North Michigan Avenue Suite 800 Chicago, IL 60601 Igreenberg@greenberglaw.net	\$335 for court costs; \$1200.00 for fees	9/7/2016	\$1,535.00
	CC Advising Inc. 703 Washington Ave Suite 200 Bay City, MI 48708 www.ccadvising.com	mandatory prefiling credit counseling course	9/6/2016	\$9.76

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Debtor 1 Elizabeth E Stein

Address Person's relationship to you  19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of whibeneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Name of trust  Description and value of the property transferred  Date mad  Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your be sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unior houses, pension funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Financial Institution  Address (Number, Street, City, State and ZIP Code)  Who else had access to it?  Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it?  Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it?  Address (Number, Street, City, State and ZIP Code)  No Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No Address (Number, Street, City, State and ZIP Code)  No Address (Number, Street, City, State and ZIP Code)	[ [	Vithin 1 year before you filed for bankruptcy, romised to help you deal with your creditors o not include any payment or transfer that you li	or to make payments			r transfer any proper	rty to anyone who
Address transferred was made  18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your proper include gifts and transfers that you have already listed on this statement.    No	-	- 10011					
transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your proper include gifts and transfers that you have already listed on this statement.  No Yes, Fill in the details.  Person Who Received Transfer Address Address Person's relationship to you  19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of white beneficiary? (These are often called asset-protection devices.)  No Yes, Fill in the details.  Name of trust  Description and value of the property transferred  Date mad  Person Who Received Transfer Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No Yes, Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  No Yes, Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  No Yes, Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes, Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes, Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes, Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes, Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes, Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes, Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes, Fill in the details.				alue of any prope	erty	or transfer was	Amount of payment
Address Person's relationship to you  19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of whibeneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Name of trust  Description and value of the property transferred  Date mad  Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your be sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unior houses, pension funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Financial Institution  Address (Number, Street, City, State and ZIP Code)  Who else had access to it?  Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it?  Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it?  Address (Number, Street, City, State and ZIP Code)  No Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No Address (Number, Street, City, State and ZIP Code)  No Address (Number, Street, City, State and ZIP Code)	t     	ansferred in the ordinary course of your bus aclude both outright transfers and transfers made aclude gifts and transfers that you have already ling.  No	iness or financial affa e as security (such as the	irs?			
Address Person's relationship to you  19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of whibeneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Name of trust  Description and value of the property transferred  Date mad  Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your be sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unior houses, pension funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Financial Institution  Address (Number, Street, City, State and ZIP Code)  Who else had access to it?  Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it?  Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it?  Address (Number, Street, City, State and ZIP Code)  No Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No Address (Number, Street, City, State and ZIP Code)  No Address (Number, Street, City, State and ZIP Code)			Description and ve	alue of	Describe a	ny property or	Date transfer was
19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of whibeneficiary? (These are often called asset-protection devices.)  No		Address			payments	received or debts	made
beneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Name of trust  Description and value of the property transferred  Date mad  Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your be sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unior houses, pension funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and 2IP account number account number account number account or instrument account was closed, sold, moved, or transferred  21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for cash, or other valuables?  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and 2IP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State Contents to it?		erson's relationship to you					
Part 8:	k I	eneficiary? (These are often called asset-protect No		property to a se	elf-settled tru	st or similar device o	of which you are a
Part 8:		Name of trust	Description and va	alue of the prope	rty transferre	ed	Date Transfer was
20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your be sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unior houses, pension funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  Describe the contents		tamo or trast	Description and V	ande or the prope	ity transferre	, <b>u</b>	made
sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unior houses, pension funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP account number account number account number account or instrument account was closed, sold, moved, or transferred.  21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for cash, or other valuables?  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access Describe the contents Dr. Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.	Part	List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Stora	age Units		
Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  Last 4 digits of account or instrument  Type of account or instrument  Date account was closed, sold, moved, or transferred  21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for cash, or other valuables?  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)	5   	old, moved, or transferred? nclude checking, savings, money market, or c ouses, pension funds, cooperatives, associa No	other financial accoun	ts; certificates of			,
Address (Number, Street, City, State and ZIP   account number   instrument   closed, sold, moved, or transferred    21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for cash, or other valuables?  No   Yes. Fill in the details.  Name of Financial Institution   Address (Number, Street, City, State and ZIP Code)   Address (Number, Street, City, State and ZIP Code)   Address (Number, Street, City, State and ZIP Code)    No   Yes. Fill in the details.  Name of Storage Facility   Address (Number, Street, City, State and ZIP Code)   Describe the contents   Describe the contents			ant A dimita of	T of occount	Nam Dat		l aat balanaa
No     Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No     Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  Describe the contents		Address (Number, Street, City, State and ZIP		• •	clos	sed, sold, ved, or	Last balance before closing or transfer
☐ Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  Part of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  No ☐ Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)			ar before you filed for	bankruptcy, any	safe deposit	box or other deposi	tory for securities,
Address (Number, Street, City, State and ZIP Code)	 						
■ No □ Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, Address (Number, Street, City,			Address (Number, St		escribe the c	contents	Do you still have it?
Address (Number, Street, City, State and ZIP Code) to it? Address (Number, Street, City,	ا	I No		home within 1 ye	ear before yo	u filed for bankruptc	y?
State and LIP Code)			to it?		escribe the c	contents	Do you still have it?

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Case number (if known) Document

Debtor 1 Elizabeth E Stein

Par	t 9: Identify Property You Hold or Control for	Someone Else			
23.	Do you hold or control any property that someofor someone.	one else owns? Include any proper	rty yo	u borrowed from, are storing fo	r, or hold in trust
	■ No				
	Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	scribe the property	Value
Par	t 10: Give Details About Environmental Information	ation			
For	the purpose of Part 10, the following definitions	apply:			
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul	ir, land, soil, surface water, ground			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	-	law,	whether you now own, operate,	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		s was	te, hazardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of when	n the	y occurred.	
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	und	er or in violation of an environm	ental law?
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	strative proceeding under any env	ironn	nental law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case
Par	t 11: Give Details About Your Business or Con	nections to Any Business			
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of	the following connections to an	y business?
	☐ A sole proprietor or self-employed in a t	trade, profession, or other activity,	, eithe	er full-time or part-time	
	■ A member of a limited liability company	(LLC) or limited liability partnersh	nip (L	LP)	
	☐ A partner in a partnership				
	☐ An officer, director, or managing execut	tive of a corporation			
	☐ An owner of at least 5% of the voting or	equity securities of a corporation			

Case 16-29082 Doc 1 Filed 09/12/16 Entered 09/12/16 15:28:02 Page 35 of 46 Case number (if known) Document Debtor 1 Elizabeth E Stein ■ No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed EIN: **Root System Juice Company** manufactured and sold juices and 47-1933702 509 S Trenton smoothies retail From-To 7/2014-11/15 Pittsburgh, PA 15221 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Elizabeth E Stein Signature of Debtor 2 Elizabeth E Stein Signature of Debtor 1 Date Date September 12, 2016

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)? ■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1	Elizabeth E Stein			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number -				Check if this is an amended filing

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	<u>_</u>
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	Elizabeth E Stein	Case number (if known)		
name: Descrip	otion of	<ul><li>☐ Retain the property and redeem it.</li><li>☐ Retain the property and enter into a Reaffirmation Agreement.</li></ul>	☐ Yes	
property securing debt:		☐ Retain the property and [explain]:	_	
For any ui	rmation below. Do not list real estate	ty Leases you listed in Schedule G: Executory Contracts and Unexpired leases. Unexpired leases are leases that are still in effect; the ty lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.	
Describe	your unexpired personal property lea	ases	Will the lease be assumed?	
Lessor's r Description Property:	name: on of leased		□ No □ Yes	
Lessor's r Description Property:	name: on of leased		□ No	
Lessor's r Description Property:	name: on of leased		□ No □ Yes	
Lessor's r Description Property:	name: on of leased		□ No □ Yes	
Lessor's r Description Property:	name: on of leased		□ No □ Yes	
Lessor's r Description Property:	name: on of leased		□ No □ Yes	
Lessor's r Description Property:	name: on of leased		□ No	
	Sign Below			
	nalty of perjury, I declare that I have in hat is subject to an unexpired lease.	dicated my intention about any property of my estate that sec	cures a debt and any personal	
	Elizabeth E Stein	x		
	abeth E Stein ature of Debtor 1	Signature of Debtor 2		
Date	September 12, 2016	Date		

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-29082 Doc 1 Filed 09/12/16 Entered 09/12/16 15:28:02 Desc Main Document Page 42 of 46

B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court Northern District of Illinois**

In re	Elizabeth E Stein		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR DE	EBTOR(S)
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,200.00
	Prior to the filing of this statement I have received			1,200.00
	Balance Due		\$	0.00
2. T	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. T	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4. <b>I</b>	■ I have not agreed to share the above-disclosed comp	ensation with any other person	unless they are mem	bers and associates of my law firm.
5. I a b c d	I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name. In return for the above-disclosed fee, I have agreed to remark an analysis of the debtor's financial situation, and render the preparation and filing of any petition, schedules, stated Representation of the debtor at the meeting of creditor and the interpretation in the debtor at the meeting of creditors. In the provisions as needed.  Negotiations with secured creditors to represent the debtor and applications and applications are debtors and applications. It is also the debtors in any discontinuous and the debtors in any discontinuous and the debtors in any discontinuous and the debtors and the debtors in any discontinuous and the debtors and the debtors in any discontinuous and the debtors and the debtors in any discontinuous and the debtors are debtors and the debtor and the debt	mes of the people sharing in the ender legal service for all aspectating advice to the debtor in determent of affairs and plan which ors and confirmation hearing, at educe to market value; exerts as needed; edoes not include the following schargeability actions, judi	e compensation is atta ts of the bankruptcy of termining whether to a may be required; and any adjourned hea temption planning; g service: icial lien avoidance	ched.  ase, including: file a petition in bankruptcy; rings thereof;  preparation and filing of  es, relief from stay actions or
		CERTIFICATION		
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	y agreement or arrangement for	r payment to me for re	epresentation of the debtor(s) in
	eptember 12, 2016	/s/ Lorraine M. G		
Do	ate	Lorraine M. Gree Signature of Attorna Lorraine M. Gree 150 N. Michigan Suite 800 Chicago, IL 6060 312-588-3330 Fa	nberg Avenue 1 ax: 312-264-5620	
		Igreenberg@gree Name of law firm	enberglaw.net	

The undersigned hereby retains as my Attorney, LORRAINE M. GREENBERG and such other attorneys as may be employed by her and I hereby give permission to Lorraine M. Greenberg to hire other attorneys as co-counsel and to represent me, and to use administrative assistants of her choosing in the following legal matter:

PLUS An additional \$10 - 50 approximately for each credit counseling session (two are required) (I pay this directly to an approved credit counseling agency. Ms. Greenberg will provide me with information regarding agency)

PLUS An additional \$225.00 for each Trustee hearing that I fail to attend.

PLUS An additional fee billed at \$300.00 per hour for the defense of an adversary proceeding (\$3,000.00 minimum retainer)

**PLUS** An additional \$ 100.00 fee + \$30.00 court costs to add creditors after case is filed.

PLUS An additional \$450.00 fees to prepare and present either a Motion for Redemption, a Motion to Avoid Lien or Motion to Reopen Case (plus court costs to reopen the case of \$260.00), all of which must be paid in full before Attorney Greenberg will prepare and present any of these Motions.

By signing below I authorize Ms. Greenberg to deposit all funds received for attorneys fees to be deposited into her operations account immediately and to use the funds immediately as her own funds, as an advance payment retainer. I also authorize her to deposit all funds into her Client funds account and immediately transfer the lump sum attorneys fees agreed to above to her operations account. I understand that all money paid for work performed and earned is NON-REFUNDABLE. In every case, the initial retainer of \$500.00 is non-refundable. This is a minimum charge. It covers our fees and costs for opening a file on your behalf and inputting your information into our computer system. If Client chooses not to proceed with the Chapter 7 for any reason, any fees earned for work performed or for costs expended before the case has been filed are non-refundable. I understand that attorney services may be billed at the rate of \$275.00 per hour and paralegal services up to \$100.00 per hour.

I have been told that both a chapter 7 and Chapter 13 are proceedings under the U.S. Bankruptcy Code, and that they both affect my credit rating. My attorney has advised me that the decision to file either type of bankruptcy must be carefully considered, and that the decision is mine alone. My attorney has explained both Chapter 13 and Chapter 7 to me and by signing below I acknowledge having been given a copy of each of the Disclosure Forms and the Bankruptcy Information Sheet.

I understand that all of the fees and costs must be paid in full before my case will be fully prepared and filed with the Court, unless otherwise agreed to by Lorraine M. Greenberg. I understand that I will not have the Court's protection from my creditors until the fees and costs have been paid in full, unless otherwise agreed to in writing by Lorraine M. Greenberg and myself.

I have not been made any promises or guarantees other than that my attorneys will represent me in strict compliance with the law, and to the best of their ability and knowledge. I promise to tell my attorneys and the Court the full truth and to cooperate fully with my attorneys in this legal matter, and that if I do not, I agree that my attorney may discontinue representing me.

By signing below. I authorize my attorneys and their staff to file all necessary documents and schedules electronically with the Court and to fax or mail or email copies of pages from my Bankruptcy Petition and Schedules as well as the Notice of Bankruptcy Filing to my Employer, or any other entities my attorneys deem necessary. I also authorize my attorneys to contact whomever is necessary to obtain documentation to support my testimony as to my assets, liabilities, and income, including my present or past employer and the Internal Revenue Service. I further authorize my attorney to use email as a means of communication between myself and/or my creditors and employer.

I understand that it is my responsibility alone to obtain a Certificate of Completion from a credit counseling agency approved by the U.S. Trustee and to have it faxed to my attorneys at (312)264-5620 or delivered in person or emailed to my attorney at <a href="mailto:lgreenberg@greenberglaw.net">lgreenberg@greenberglaw.net</a> and that my attorneys cannot file my case until a certificate is received. I have also been told that I must complete a second credit management training program after my case is filed in order to obtain a discharge of my debts.

By signing below, I acknowledge that I have been informed of any potential conflict of interest that my attorneys may have and that I waive any such conflict without further notice. I agree to pay all reasonable and necessary attorneys fees and costs incurred by Ms. Greenberg in the collection of any amounts due under this contract.

I have read this agreement and fully understand it and herewith acknowledge receipt of a copy. I acknowledge that this agreement is the only agreement relating to attorneys fees that I have signed.

Debtor Joint Debtor

Agreed To:

Lorraine M Greenberg

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### **United States Bankruptcy Court** Northern District of Illinois

In re	Elizabeth E Stein		Case No.	
		Debtor(s)	Chapter 7	
	VE	RIFICATION OF CREDITOR MA	TRIX	
		Number of C	reditors:	9
	The above-named Debtor(s) l (our) knowledge.	hereby verifies that the list of creditor	rs is true and correct to the	ne best of my
Date:	September 12, 2016	/s/ Elizabeth E Stein Elizabeth E Stein Signature of Debtor		

Chase Card Po Box 15298 Wilmington, DE 19850

Discover Financial Po Box 3025 New Albany, OH 43054

Discover Financial Po Box 15316 Wilmington, DE 19850

First Premier Bank 601 S Minneaplois Ave Dious FDalls, SD 57104

First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57104

PNC Bank
PO Box 3429
Pittsburgh, PA 15230-3429

Synchrony Bank Attn: Bankruptcy Dept Po Box 965061 Orlando, FL 32896-5061

Synchrony Bank/PayPal Cr Po Box 965064 Orlando, FL 32896

Synchrony Bank/PayPal Cr Po Box 965005 Orlando, FL 32896